Child Care and Its Impact on Children 0–2 Years of Age. Commenting: Belsky, Howes, and Owen

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Introduction

Three highly respected researchers have written papers for the CEECD about child care and its impact on young children, aged 0–2. This topic has enjoyed vigorous debate among both the general public and researchers as a large proportion of mothers with young children are currently working outside home — some by choice, others, out of necessity. Most parents are therefore concerned with the following questions:

1. What should I do with my child when I am not at home?
2. Will it hurt my child if I work outside of the home?

These questions have occupied the minds of both scientists and parents for the past 50 years and no clear answers have emerged, to date. One author has been reviewing research in this area for a quarter of a century. Looking back on the early years of research, parents were provided with information that was based more on theories than on scientific facts. According to these theories, separating a young child from his or her mother was deemed to be detrimental before age 3.

The researchers in a number of countries were not satisfied with existing answers to parents’ concerns, many studies were conducted to seek more definitive information. Despite their efforts, for a long time, there was no proof to substantiate the claim that day care either damaged or benefited children.

In the late 80s and early 90s, published data from Sweden showed that early experiences in day care could actually be beneficial to young children. Results were contrary to most expectations, American researchers in particular were forced to embrace a more ecological view of day care. It was no longer a question of...
supporting day care or not. Nor was it simply a question of the age at which a child could be placed in child care. In order to understand the differences in results between American and Swedish research, it was necessary to take other variables into consideration. The reputed high quality of Swedish day care was cited by American researchers to explain the differences in results. However, there are other likely explanations, which I will discuss later on.

**Research and Conclusions**

Most research has been conducted with very small groups of children who have been followed for only a few years. Unfortunately, there are serious problems with this kind of research. First, when working with small investigation groups, it is difficult to know anything about how the results gathered may apply to the general population. Second, it is impossible to say anything about the long-term effects of child care.

In an effort to overcome these problems, a large-scale research project was undertaken by the National Institute of Child Health and Human Development (NICHD). The study follows 1,274 mothers and the development of their children who have experienced various kinds of child care. Each child has entered child care early in life. Data has been published up to the age of 4½–5 years. Twenty-five of the United States' most recognized researchers are participating in this study — a very impressive team. Other research projects have also involved significant numbers of subjects. For example, one study followed 733 children from ages 4 to 8 and another monitored 414 children, from 14 to 54 months of age.

Two of the authors — Belsky and Tresch Owen — rely heavily on data from the NICDH Study in their papers while Howes also relies on other sources. Their conclusions are relatively similar. All concur that early day care experiences can be positive for children’s cognitive and linguistic development. On the other hand, the quality of interaction with their mothers may be jeopardized by low-quality care and extended periods of time spent in care. Belsky in particular stresses these points and cites a noteworthy, albeit modest, developmental risk. This position is congruent with his earlier writings. However, Belsky’s warnings of developmental risks are far less rigid in this paper than in previous papers.

All three authors agree that *high-quality child care* is important, but none of them attempt to define what *high-quality* might mean.

Indeed, these papers comprise some problems. For one thing, the authors rely solely on American studies. Thus, we learn nothing about what child care can mean for children’s development in countries that have chosen to support families in other ways and with other kinds of child care. In Sweden, for instance, child care is regarded as part of the educational system from the first years of life, and employees are preschool teachers with three-year university training or child minders with a vocational three-year training. The Swedish system thereby ensures a high level of quality in child care.

Another problem is the short follow-up period in the studies cited by the authors. Even if some of the children showed some behaviour or disciplinary problems after spending time in child care, we know nothing about how long-lasting these effects may be. Furthermore, some effects may manifest themselves years later. These *sleeper effects* may be positive or negative.
In my own studies, I found that positive effects on social development did not show up until the early teenage period, when they were very substantive.

**Implications for Policy and Services**

The authors all stress the importance of increasing the quality of child care. Belsky also recommends that other steps (e.g., expanding parental leave and introducing tax policies conducive to good-quality, affordable child care) need to be taken. I fully agree with these recommendations, but would add some further suggestions, based on my experience regarding the Swedish system.

In Sweden, the concept of family support has a broad connotation. One important aspect of it is that parents should be able to stay home with their children when they are most in need of a mother or father at home (i.e., when the child is very young or ill). Therefore, parental leave (with 80% of the salary paid by the state) lasts for 12 months. In addition, it is possible for one parent to stay home if the child falls ill during the preschool years, while receiving the same payment he or she would for parental leave. This means that parents can feel confident and relaxed about the care of their children and therefore be better parents at home. It is also worth noting that medical care is free for children, along with a number of other measures.

Some readers may ask: “Can we really afford to spend so much money on our children?” My answer is as follows: Either we spend this money now or we will have to spend ten times as much to take care of all of the problems a bad family support system will create later on.  

**References**


Note:

Comments on original paper published by Jay Belsky in 2003. To have access to this article, contact us at cedje-ceecd@umontreal.ca.